



Connecting Science to Service



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Prevention
www.samhsa.gov

*Effective Substance Abuse
and Mental Health
Programs for
Every Community*



Selected SAMHSA Model Programs have positive effects on:

Drug and Alcohol Use

- Reduced occurrences of drinking and driving 24%
- Reduced marijuana use 75%
- Sustained 82% of alcohol nonusers to remain nonusers

Violence

- Reduced student reports of being bullied and bullying others 30% to 70%
- Reduced weapon carrying among high school males 25%

School Achievement

- Decreased absenteeism 75%
- Multiyear 100% high school graduation rate among participants
- Decreased grade retention 47%

Family Functioning

- Improved family functioning 75%

Social Cost

- Produced lifetime social services cost savings, per youth, of up to \$131,000

What do Communities Need?

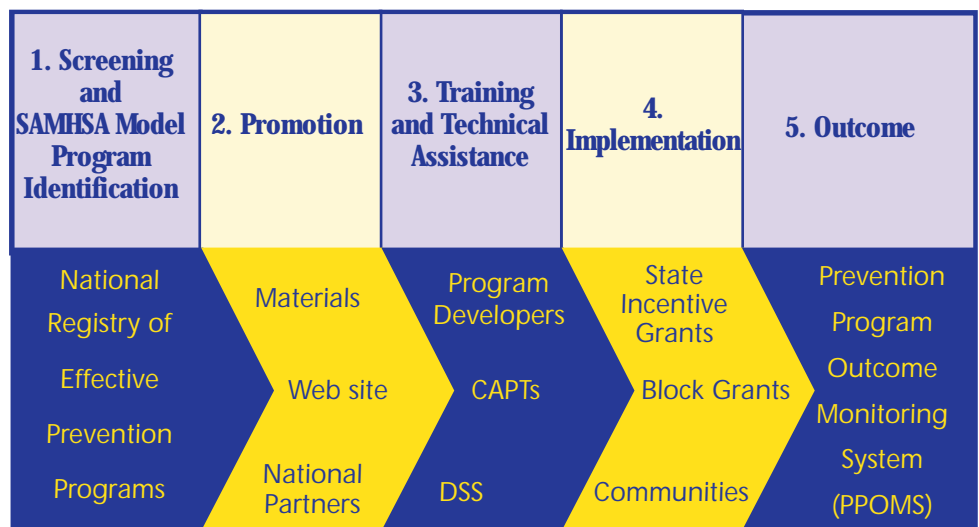
Today, individuals and organizations working to prevent substance abuse know that positive results are an important factor in their ongoing efforts to obtain and maintain funding, provide services, and affect lives. Facing large challenges and limited resources, communities today need:

- Proven program models
- Useful materials
- Training and technical assistance
- Access to funding resources

How can SAMHSA Model Programs Meet the Needs of Communities?

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention (CSAP) has developed and implemented a comprehensive system to screen, select, and disseminate scientifically-defensible prevention programs. Using this system, SAMHSA/CSAP has identified nearly 100 programs that can help meet communities' needs.

SAMHSA Model Programs National Dissemination System



1. Screening and Identifying SAMHSA Model Programs

- SAMHSA/CSAP created the National Registry of Effective Prevention Programs (NREPP) to screen and select science-based prevention programs.
- Programs submitted to NREPP are analyzed and scored relative to 15 criteria, then defined in one of three categories—Model Programs, Effective Programs or Promising Programs.
- SAMHSA Model Programs are Effective Programs whose developers have the capacity and have coordinated and agreed with SAMHSA/CSAP to provide quality materials, training, and technical assistance to practitioners who wish to adopt their programs.

2. Promoting SAMHSA Model Programs

SAMHSA/CSAP provides communities with a selection of scientifically defensible prevention programs that focus on areas with the greatest influence on youth development and with strong outcomes for:

- Diverse ethnic populations
- Substance abuse, steroid abuse, school dropout, violence, HIV/AIDS, and other high-risk behaviors
- Community, family, school, clinical, faith-based, and workplace settings
- People of all ages, with focus on youth

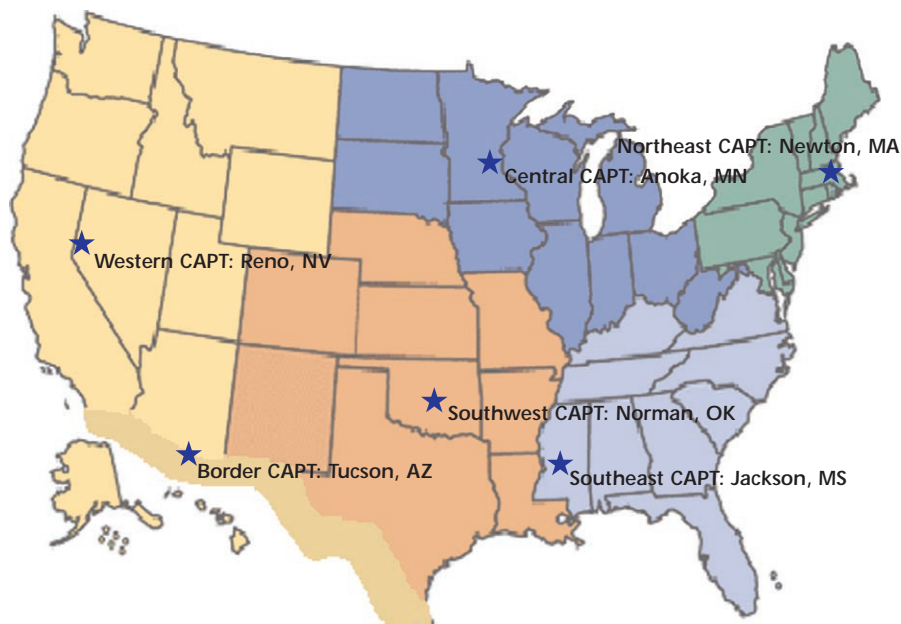
Creating and Applying Innovative Promotion Tools

SAMHSA/CSAP creates and offers a variety of multimedia presentations and events that promote Model Programs, such as:

- Informational materials, including fact sheets, brochures, electronic notification about new funding and program developments, and annual compendiums on SAMHSA Model Programs and leading-edge prevention trends, research, and outcomes
- A Web site, <http://modelprograms.samhsa.gov/>, as an immediate source of information on Model Programs, science-based prevention efforts, and other prevention resources
- Response to public inquiry through a toll-free line and an Internet e-mail account
- Outreach to national organizations and associations to stimulate interest in science-based prevention and implementation of SAMHSA Model Programs
- A funding resources database

3. Training and Technical Assistance

- **Centers for the Application of Prevention Technologies (CAPTs)**—SAMHSA/CSAP's six regional CAPTs are positioned to promote SAMHSA Model Programs and provide SAMHSA Model Program information, training, and technical assistance opportunities.



NREPP Evaluation Criteria

Theory

Intervention fidelity

Process evaluation

Sampling strategy and implementation

Attrition

Outcome measures

Missing data

Data collection

Analysis

Other plausible threats to validity

Replications

Dissemination capability

Cultural- and age-appropriateness

Integrity

Utility



- **National Clearinghouse for Alcohol and Drug Information (NCADI)**—NCADI disseminates information and relies on relationships with existing intermediaries, such as the approximately 800 RADAR (Regional Alcohol and Drug Awareness Resource) Network members to reach further into communities with messages and resources on SAMHSA Model Programs.
- **Prevention Decision Support System (DSS)**—Technical assistance on program selection through SAMHSA/CSAP's DSS, <http://www.preventiondss.org/>.

4. Implementation of SAMHSA Model Programs

Using SAMHSA/CSAP Resources to Assist Communities

State Incentive Grants (SIGs)—SIGs, funded through SAMHSA/CSAP to State governors, are funding sources for SAMHSA Model Program implementation. At least fifty percent (50%) of the funds used for services under this program must be used for science-based programs. Each of the States awarded SIGs has a coordinator in the State agency with access to community groups in need of science-based prevention programs.

Block Grants—The goal of the Substance Abuse Prevention and Treatment (SAPT) Block Grant is to increase the quantity and quality of substance abuse prevention and treatment services. These funds are awarded directly to the States and are allocated according to a formula legislated by Congress. States then distribute these funds to cities and counties within their jurisdictions based on need. Federal law requires States to allocate at least 20 percent of SAPT Block Grant funds for primary prevention services.

Communities—Communities are seeking quality prevention programs that they know will work. SAMHSA/CSAP provides information, capacity building, and resources to help communities implement effective prevention.

5. Outcomes: Measuring Success

Using the Prevention Performance Monitoring Outcome System (PPOMS), SAMHSA/CSAP measures success through tracking key indicators, such as:

- Number of programs meeting NREPP review criteria and being selected as effective programs
- Contacts made with SAMHSA/CSAP and SAMHSA Model Programs developers requesting information related to science-based prevention and Model Programs
- Quantities of SAMHSA Model Programs curricula distributed
- Number of trainings and technical assistance provided by SAMHSA Model Programs developers and other science-based prevention experts
- Quantity and quality of implementation of scientifically defensible SAMHSA Model Programs across the country.

Select SAMHSA Model Programs National Partners

Community Anti-Drug Coalitions of America (CADCA)

National Association of State Alcohol and Drug Abuse Directors/National Prevention Network (NASADAD/NPN)

USDA - Cooperative State Research Education Services

National Association of Elementary School Principals

National Alliance of Youth Sports

National Head Start Association

National Council on the Aging

National Mental Health Association

National Senior Service Corps

Phoenix House

HHS Office of Minority Health

*AmeriCorps*VISTA*

